

CLAIMS ONLY							Application Number 09/807367		Filing Date			
							Applicant(s)					
							* May be used for additional claims or amendments					
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT							
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1			/				51			/		
2				/			52			/		
3				/			53			/		
4				/			54			/		
5				/			55			/		
6				/			56			/		
7				/			57			/		
8				/			58			/		
9				/			59			/		
10				/			60			/		
11				/			61			/		
12				/			62			/		
13				/			63			/		
14				/			64		/	/		
15				/			65		/	/		
16				/			66		/	/		
17				/			67		/	/		
18				/			68		/	/		
19				/			69		/	/		
20				/			70		/	/		
21				/			71		/	/		
22				/			72		/	/		
23				/			73		/	/		
24				/			74		/	/		
25				/			75		/	/		
26				/			76		/	/		
27				/			77		/	/		
28				/			78		/	/		
29				/			79		/	/		
30				/			80		/	/		
31				/			81		/	/		
32				/			82		/	/		
33				/			83		/	/		
34				/			84		/	/		
35				/			85		/	/		
36				/			86		/	/		
37				/			87		/	/		
38				/			88		/	/		
39				/			89		/	/		
40				/			90		/	/		
41				/			91		/	/		
42				/			92		/	/		
43				/			93		/	/		
44			/	/			94		/	/		
45			/	/			95		/	/		
46			/	/			96		/	/		
47			/	/			97		/	/		
48			/	/			98		/	/		
49			/	/			99		/	/		
50			/	/			100		/	/		
Total Indep							Total Indep			4		
Total Depend							Total Depend			83		
Total Claims							Total Claims			87		